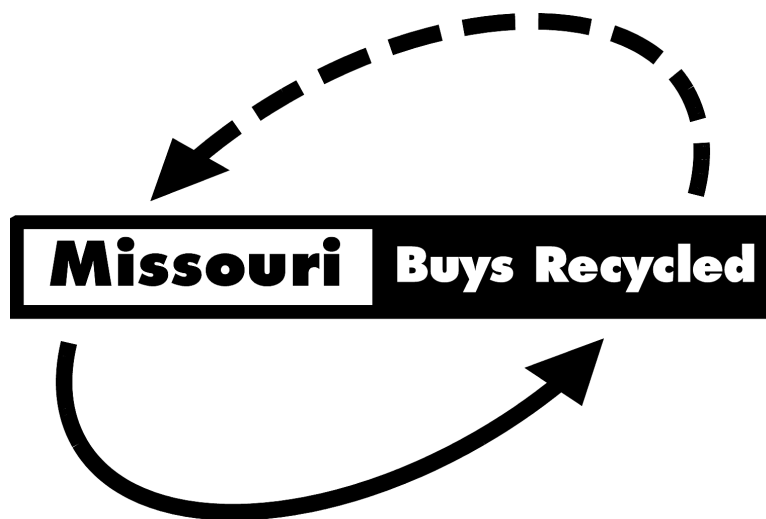




Fiscal Year 2002 Missouri Market Development Program

**Application for Financial Assistance
for the acquisition of equipment
necessary to manufacture products
from recycled materials**



Offered by the Missouri

EIERA
Environmental Improvement and Energy Resources Authority

Environmental Improvement and Energy Resources Authority
in cooperation with the
Department of Natural Resources
and the
Department of Economic Development

TABLE OF CONTENTS

GENERAL INFORMATION

Program Objective.	3
Program Administration.	3
Eligibility.	3
Financial Assistance Amount.	4
Selection Process	4
Evaluation Criteria	5
Submittal Requirements.	5
Acceptance or Rejection of Application	5
Confidentiality of Submitted Materials	5
Financial Assistance Agreement	5
Where to Send Your Application	7

APPLICATION

I. Financial Assistance Application Table of Contents.	8
II. Pre-Application Checklist	9
III. Project and Applicant Profile	10
IV. Project Summary.	13
V. Recovered Material(s) Used.	17
VI. Marketing Strategy.	17
VII. Operational Financial Information.	22
VIII. Applicant Disclosure	28
IX. Management Certification - Credit Report Authorization.	29
X. Equipment Bids	30
Attachment A – Cooperation with Solid Waste Management District	31
Attachment B – Financial Statement for general partnership, limited Partnership, sole proprietorship, not for profit organization	32
Attachment C – Financial Statement for new business, less than 3 years	34
Appendix A: Solid Waste Management Regional Boundaries.	35

FOR FURTHER INFORMATION

If you have any questions, or are unsure whether your project would be eligible for consideration, please feel free to contact:

Missouri Market Development Program
Phone: (573) 526-5555
E-mail: nrcader@mail.dnr.state.mo.us

PROGRAM OBJECTIVE

The Missouri Market Development Program was created to promote recycling throughout Missouri by focusing economic development efforts on businesses and projects that use materials recovered from solid waste. Successful expansion of markets for recovered materials supports increased recycling activities, helping the state to reach its solid waste reduction goal.

As Missouri's goal of reducing solid waste through recycling and waste reduction is achieved, new recycling industries will be needed.

This new recycling infrastructure creates jobs and opportunities by adding value to recovered materials. Not only is the solid waste disposal problem reduced by using the commodity of recovered materials in the manufacturing of new products, the economy is expanded.

The financial assistance offered by the Missouri Market Development Program is targeted toward developing and expanding manufacturing capacity in Missouri to utilize recovered materials. Manufacturing, for the purpose of the Program, is any type of activity that utilizes recovered materials as feedstock to produce a marketable product.

PROGRAM ADMINISTRATION

The Environmental Improvement and Energy Resources Authority (EIERA) in cooperation with the Department of Natural Resources (DNR) and Department of Economic Development (DED) administer the Missouri Market Development Program.

Monies for the Program come from the Solid Waste Management Fund created pursuant to RSMo Section 260.330. The source of the funds is a per ton fee levied at sanitary landfills, a per ton fee for demolition landfills and a per ton fee on solid waste transported out of state through a transfer station for disposal. Funding for the Missouri Market Development Program is subject to the legislative appropriation process.

ELIGIBILITY REQUIREMENTS FOR APPLICANT

An individual, private business, non-profit organization or public institution currently operating in Missouri or who will be operating in the state as a result of the project is eligible.

All projects must be located in Missouri and be based on a technology that has been demonstrated beyond the research stage. Further, they must be technically feasible for full-scale operation and comply with all applicable environmental, safety, and legal requirements.

ELIGIBILITY REQUIREMENTS FOR PROJECTS

Eligible projects include those resulting in;

- the manufacture of products from recovered materials *and/or*
- the final processing of recovered materials into feedstock.

Ineligible projects include those resulting in:

- research and development projects

An applicant that has previously received financial assistance from the Missouri Market Development Program may apply if the previously approved project is complete and all terms of the agreement are met. Applicants meeting these criteria are eligible to apply for fifty-percent of the total equipment cost of the new project, up to \$50,000. Repeat applications must demonstrate that a new product will be developed, different recovered materials will be used or a significant increase in diversion will be realized. A combination of these outcomes will strengthen the application.

Projects utilizing the following materials will not be considered:

- recovered metals;
- white goods;
- materials and by-products generated from, and reused within, the original process;
- tires, unless for a product other than crumb rubber;
- materials disposed of at a hazardous waste landfill or materials considered to be hazardous such as lead, acids and solvents.

For more information about hazardous materials, please contact:

Missouri Department of Natural Resources'
Hazardous Waste Program
Post Office Box 176
Jefferson City, Missouri 65102
(573) 751-3176

USE OF FINANCIAL ASSISTANCE FUNDS

- **Eligible expenses include only the purchase of manufacturing equipment and machinery (or the conversion of existing equipment and machinery) to manufacture products that contain recovered materials (other than internal waste or mill-broke). Equipment purchased for the final processing of recovered materials to be used by others in the manufacture of recycled-content products is also eligible. Equipment purchased with Market Development funds should "add value" to the recovered material being used.**
- **Equipment purchases must be made after the effective date of a signed agreement to be eligible for funding up to the approved amount.**

FINANCIAL ASSISTANCE AMOUNT

Applications are accepted at any time, however, applications received by the Program, after the funds available for the fiscal year have been committed to successful applicants, will be returned.

Upon financial assistance approval, the Market Development Program may fund 75% of specific equipment costs with a maximum funding level of \$50,000. No portion of the balance of the equipment cost can include Solid Waste Fund monies (DNR or Solid Waste Management District grants). The amount of funding offered will be determined in the evaluation process of the Market Development Steering Committee.

SELECTION PROCESS

All applications are first reviewed for completeness. Incomplete applications will be returned with a letter highlighting deficiencies to be corrected. Deficient or incomplete applications will delay consideration.

The Market Development Steering Committee, comprised of representatives from EIERA, DNR and DED, will evaluate all completed applications based on the Program's evaluation criteria. Projects that meet or exceed the criteria for funding will be presented to the EIERA Board for review and final approval.

Funding for approved projects will be provided as a reimbursement of costs incurred for the purchase of the equipment. The EIERA Board will negotiate the method of payment, along with other contract terms, following any approval of financial assistance.

EVALUATION CRITERIA

The Program is particularly interested in projects that expand Missouri's recycling business base while building markets for the materials collected through Missouri's local recycling programs.

Factors which will be considered in determining whether to fund a project include: type and amount of recovered material used, strategy for market development, operational capacity, technical feasibility, and financial feasibility.

A credit report will be requested to aid in the evaluation of an application for financial assistance. Typically, the report will be obtained on the business applying for financial assistance. However, if the business is new and does not have a credit history, a credit report will be obtained on the individual owner(s). Strict confidentiality will be maintained. If your business is new and does not have a credit history, please complete Attachment C. Strict confidentiality will be maintained.

SUBMITTAL REQUIREMENTS

Applications may be submitted at any time during the year. Generally, a minimum of twelve weeks is needed for evaluation, recommendation and final decision. After a final approval of funding, terms of an agreement will be developed and an agreement must be executed.

Nine (9) copies, including the original (**please leave the original in loose-leaf form**), of this application must be submitted to the Market Development Program. All applications must be marked with successive page numbers. Extra material provided or attached to the financial assistance application must be numbered sequentially. **Non- compliance with this section may result in the inability to process the application.**

ACCEPTANCE OR REJECTION OF APPLICATION

The Market Development Steering Committee reserves the right to accept, reject, or request changes in any application for financial assistance. The Market Development Steering Committee may approve any number of applications, as deemed in the best public interest of the state of Missouri. The Market Development Steering Committee is not obligated to provide a debriefing for unsuccessful applicants. The Market Development Program is not liable for any costs incurred by any parties seeking funding.

CONFIDENTIALITY OF SUBMITTED MATERIALS

To the extent feasible and permissible by law, the Market Development Program will honor an applicant's request to keep financial and proprietary information submitted in an application confidential. Such information will be treated as confidential only if each page of the information to be kept confidential is specifically marked or identified as confidential by the applicant.

If the application results in an award of financial assistance, the honoring of confidentiality of identified data shall not limit EIERA's right to disclose the results of the project to the public.

FINANCIAL ASSISTANCE AGREEMENT

Projects receiving financial assistance from the EIERA Market Development Program will be required to enter into an agreement with the EIERA. The Agreement will be secured through a security interest on the equipment purchased through Market Development funds, and a Demand Note. Ten percent of the financial assistance amount is held as retainage until the end of the project. These steps are taken to ensure that the

monies provided through the Solid Waste Management Fund, and ultimately by the citizens of Missouri, are used appropriately.

The approved application for financial assistance will be incorporated into the Agreement as the Scope of Work. Upon successful completion of the Project within the agreed to timetable, all necessary requirements in the Agreement, including the security interest in the equipment and demand note will be released.

Following is a brief discussion of some of the requirements of the Financial Assistance Agreement.

TERM

The term for all projects, unless otherwise noted in the Agreement, shall be two years. The effective date of the Agreement will depend on the specific project, and the date of approval.

PROJECT REPORTS

Quarterly reports are required, detailing the project's progress and including information on tons diverted for that quarter, problems encountered, status of scope of work schedule and production. Reports are due by January 10, April 10, July 10 and October 10. Quarterly reports are to be submitted to the Market Development Program with a copy to be provided to the Solid Waste Management District in which the project is located. In addition, projects are asked to provide an informal presentation to the Steering Committee on or near the first anniversary of the agreement.

A final report will be requested at the end of the project. This is a comprehensive report over the term of the agreement detailing total tons diverted, project successes, problems encountered and any information for improvement of the Market Development Program.

COMPENSATION

If the project is carried out in a timely manner, all quarterly reports are submitted as required and a final comprehensive report provided, the funding retained until project completion will be provided as soon after the termination date of the Agreement as possible. If any terms of the Agreement are violated, the retained monies will not be provided. Also, in the case of Agreement violations, the EIARA may seek return of compensation provided under the Agreement. The EIARA will provide written documentation of Agreement violations.

ACCOUNTING SYSTEM

Projects receiving financial assistance from the Market Development Program shall maintain an accounting system according to generally accepted accounting principles that accurately reflects all financial transactions, incorporates appropriate controls and safeguards, and provides clear references to the Project proposal. Accounting records must be supported by such source documentation as canceled checks, paid bills, payrolls, time records, contracts, and agreement award documents.

RETENTION AND CUSTODIAL REQUIREMENTS FOR RECORDS

Projects receiving financial assistance shall retain all records and supporting documents directly related to the project for a period of three years from the date of submission of the final report. Upon request, they must be made available to the Market Development Program.

PERMITS

It is the responsibility of the applicant to be in compliance with all applicable environmental laws and regulations and to obtain all required permits and licenses for the operation of the project. Proof of proper permits may be requested before funding is provided.

TAXES

The applicant is responsible for determination and payment of any taxes relating to the Agreement.

WHERE TO SEND YOUR APPLICATION

Mail your application to:

Missouri Market Development Program/EIERA
Post Office Box 744
325 Jefferson Street
Jefferson City, Missouri 65102-0744

Or deliver your application to:

Missouri Market Development Program/EIERA
325 Jefferson Street, 2nd Floor
Jefferson City, Missouri 65101

****Faxed applications will not be accepted.**

I. FINANCIAL ASSISTANCE APPLICATION TABLE OF CONTENTS

(THIS BECOMES PART OF YOUR APPLICATION)

Applications should be submitted in the following order

<u>Document(s)</u>	<u>Page Number</u>
I. Financial Assistance Application Table of Contents	_____
II. Pre-Application Checklist	_____
III. Project and Applicant Profile	_____
IV. Project Summary	
A. Project Goals	_____
B. Project Description	_____
C. Project Need	_____
D. Project Workplan and Time Table	_____
E. Permits	_____
F. Cooperation with Solid Waste District	_____
V. Recovered Materials Used	
A. Type of Material	_____
B. Annual Consumption	_____
C. Avoided Cost of Disposal	_____
D. Sources	_____
E. Collection and Delivery	_____
F. Payment for Recovered Material	_____
VI. Strategy for Market Development	
A. Recycled Products	_____
B. Market Description	_____
C. Marketing Strategy	_____
D. Pricing	_____
E. End Markets	_____
F. Competition	_____
VII. Operational and Financial Information	
A. Management Profile	_____
B. Company Summary	_____
C. Projections	_____
D. Financial Statements	_____
E. Employment	_____
F. Organizational and Financial Information	_____
VIII. Applicant Disclosure	_____
IX. Management Certification - Credit Report Authorization	_____
X. Equipment Bids	_____

II. PRE-APPLICATION CHECKLIST

Project Name: _____

Before submitting an application for financial assistance, you **MUST** complete this form. Only if the applicant can answer **YES** to questions 1 through 8 on this form should the application be prepared for submission.

	YES	NO
1. The project will be performed in the state of Missouri.	_____	_____
2. The project can be demonstrated to be technically feasible.	_____	_____
3. The project will result in (a) the final processing or conversion of recovered (recycled) materials into industrial feedstock; and/or (b) the manufacture of products from those feedstocks.	_____	_____
3. Funding request is for the purchase of equipment or machinery that will be used for the manufacturing of products that contain recovered materials or final processing of recovered materials.	_____	_____
5. Funding request is 75% of specific equipment cost not to exceed \$50,000.	_____	_____
6. The applicant will contribute a portion of the total project cost.	_____	_____
7. The project will secure sources of recovered materials in Missouri and will secure markets for the end-products produced as a result of the project.	_____	_____
8. The recovered material used in this project, (a) would have gone to a sanitary or construction/demolition landfill in Missouri; or (b) has been banned from disposal in Missouri landfills.	_____	_____
9. Has this organization received financial assistance from the Missouri Market Development Program previously?	_____	_____
If "yes," please complete the following		
9A. Funding request is 50% of the specific cost not to exceed \$50,000.	_____	_____
9B. The project will develop a new product.	_____	_____
9C. The project will use different recovered materials.	_____	_____
9D. The project will realize a significant increase in diversion.	_____	_____

III. PROJECT AND APPLICANT PROFILE

Please fill out the application in its entirety. If parts are not applicable to your business, please state reason.

1. Name of Project: _____
2. Project Description: _____

3. Legal name of business, person or entity requesting assistance _____

Mailing Address _____
Phone _____ Fax _____
4. Name of Authorized Official _____
Official Title _____
Address _____
City _____ Zip _____
Phone _____ Fax _____
5. Type of Applicant
____ Corporation ____ General Partnership ____ Limited Partnership
____ Limited Liability Company ____ Sole Proprietorship ____ S-Corporation
____ 501 (c3) not-for-profit ____ Individual ____ Public Institution
Corporation ID # _____ Federal Tax ID # _____
Social Security # _____
6. Project Manager _____
Address _____
City _____ Zip _____
Phone _____ Fax _____

III. PROJECT AND APPLICANT PROFILE (continued)

7. This project is (check one):

_____ A new business

_____ An expansion of a current activity

_____ A completely new venture for an existing business

_____ Other (please Describe)

8. This project will divert _____ tons from the waste stream annually.

9. This project will create _____ Full Time Employees (FTE) positions

10. The type of recovered material(s) used in this project is _____

11. Site Location: Provide location of project site and status of property (i.e. owned, leased or under or consideration) _____

12. Please list the Missouri Legislative representatives, in the area the project is located;

Senator _____

Representative _____

I (we) hereby certify that the information provided in this application is true and correct and conforms to the Missouri Market Development Program application guidelines.

Signature of Authorized Official(s)

Date

III. PROJECT AND APPLICANT PROFILE (continued)

TOTAL PROJECT COST _____

Source of additional funding _____

TOTAL EQUIPMENT COST _____

TOTAL FINANCIAL ASSISTANCE REQUESTED _____

Source of additional funding _____

Equipment List

List all equipment to be purchased with financial assistance. If more space is needed, please attach a separate sheet of paper and label Equipment List. **APPLICANT MUST PROVIDE THREE (3) BIDS FOR EACH PIECE OF EQUIPMENT. THESE BIDS SHOULD BE INCLUDED IN SECTION X.**

Description	New or Used	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional Equipment List Attached ☐

All applicants are to address the following areas or provide an explanation of why the items are not applicable to the proposed project. Please use the spaces provided, or make attachments as necessary.

IV. PROJECT SUMMARY

Project Goals: As concisely as possible, explain what this project intends to accomplish and why.

Project Description: Provide an overall description of the project and its current status. Include project goals and outline specific measurable objectives. Any potential barriers to project success and implementations must be addressed.

(if you prefer to use a different sheet of paper rather than this space, please mark the box where it says additional information attached)

Additional Information Attached: 0

IV. PROJECT SUMMARY (continued)

Project Need: Describe the need for this project from a resource recovery and economic perspective. Describe the approximate geographic area in Missouri that will benefit from the proposed project.

Additional Information Attached: ☐

Permits: Indicate if the company will need permits in order to use the product(s) and provide evidence that permit(s) have been issued.

Permits required by company? ☐ YES ☐ NO

If so, have you provided a copy of the issued permits? ☐ YES ☐ NO – if no, explain

Cooperation: Contact the Solid Waste Management District in which your project will be located and complete Attachment A, A map of the Solid Waste Management Districts with a listing of District Planners is attached.

Attachment A – Cooperation with the Solid Waste Management District, information attached? ☐ Yes ☐ No

IV. PROJECT SUMMARY (continued)

Project Workplan and Timetable: Include a detailed narrative of the project that discusses all tasks and activities to be performed, by whom, how and when. (Example Provided on Next Page)

Additional Information Attached 

IV. PROJECT SUMMARY (continued)

SAMPLE PROJECT WORKPLAN

PROJECT WORKPLAN AND TIMETABLE – EXAMPLE ONLY	
Project Month:	Description of goals/plans accomplished:
1st Month	Financial Assistance approved through the Missouri Market Development Program.
	Currently diverting 3000 pallets per month from Missouri's landfills.
2nd Month	Loan approval for the shop to be built on our land and ground breaking.
	The bank has voiced an interest in financing the new shop with or without
	the financial assistance through the Missouri Market Development Program.
3rd Month	Purchase and receive equipment.
	Owner will accomplish this task.
4th Month	Files first project report with the Missouri Market Development Program, to be filed by Office Secretary.
	Now diverting 4000 pallets per month from Missouri landfills.
5th Month	Completion of building, move into the new shop.
6th Month	Hire fourth full-time employee.
	This employee will be in training to strip and rebuild pallets and will take over the delivering of
	the finished product.
7th Month	Purchase 4 truck loads of pallets per week this month and each month to follow.
	Project Manager will accomplish this task.
	Hire fifth full-time employee.
	This employee will take over the delivering of the finished products and after delivery will haul
	off the unwanted pallets from the delivery site allowing the fourth employee hired to spend his
	time solely rebuilding.
	Now diverting 8,000 pallets per month from Missouri landfills.
	Complete this timetable for 24 months, through completion of the proposed project

The project summary may be released to the public by the Missouri Market Development Program in whole or in part if the financial assistance is awarded. This summary should NOT contain proprietary data or confidential business information you do not wish to make public.

V. RECOVERED MATERIALS USED

Type of Material: Specify the recovered materials that will be processed or recycled as a result of this project. Include the material quality requirements and/or specifications. Avoid generic classifications such as “waste paper” and specify the actual grades that will be utilized.

Additional Information Attached: ☐

Annual Consumption: Project annual consumption of each grade of recovered material. Show the basis for projections.

Additional Information Attached: ☐

Avoided Disposal Costs: List the current per ton costs of disposal for the recovered material(s) to be used.

Additional Information Attached ☐

V. RECOVERED MATERIALS USED (continued)

Sources: Describe the sources, including names of contacts and telephone numbers, from which the recovered materials will be obtained (e.g. municipal, commercial, institutional or industrial). Include letters of intent referencing verifiable quantities, label letters of intent "ATTACHMENT – LETTERS OF INTENT"

Additional Information Attached: ☐

Collection and Delivery: Identify how the recovered materials will be collected and delivered to the project site.

Additional Information Attached: ☐

Payment for recovered materials: Provide the cost for each recovered material(s).

Additional Information Attached: ☐

VI. MARKETING STRATEGY

Product: Describe the final recycled content product(s) that will result from this project.

Additional Information Attached: ☐

Production: Project the annual production, in tons, of each product. Include the method and complete calculations used to determine annual production.

Additional Information Attached: ☐

Market Description: Describe the market, including history, size, industry trends and the product's position in the market. Identify sources of estimates and assumptions.

Additional Information Attached: ☐

VI. MARKETING STRATEGY (continued)

Marketing Strategy: Define the marketing strategy. Include a marketing budget, advertising and promotional costs and a sales forecast based on the marketing plan.

Additional Information Attached: 0

Pricing: Include a product price schedule and an explanation of the pricing strategy.

Additional Information Attached: 0

VI. MARKETING STRATEGY (continued)

End Markets: Provide Letters of Intent or contracts with buyers to purchase finished end products.

Requested information attached? ☐ YES ☐ NO – if no, explain

Competition: List the product's major competition and location, describe any new competition entering the market, and describe how your product will be able to compete in the current market.

Additional Information Attached: ☐

VII. OPERATIONAL AND FINANCIAL INFORMATION

Management Profile: Provide a list of all key personnel involved in the project, including proprietors, business or plant manager, partners, officers, subcontractors and consultants. Include for each: complete address, phone number with area code, title, business experience and education. Include other information that demonstrates the applicant ability to carry out the proposed project. A resume of key personnel will suffice

RESUMES FOR KEY PERSONNEL ATTACHED ☐

Company Summary: Describe the history of the company and current operations. Include information such as: history, form of organization, location, size and operations of present facilities, product(s) manufactured, market share, major accounts, principal suppliers, size of workforce and any other pertinent information.

Additional Information Attached: ☐

Projections: Furnish pro forma balance sheets and income statements for the next three-(3) years. For purpose of this section , assume the market development financial assistance was awarded.

Pro forma balance sheets and income statements attached as described above? ☐ Yes ☐ No

VII. OPERATIONAL AND FINANCIAL INFORMATION (continued)

Cash Flow: Furnish a projected monthly cash flow statement for the first full year of operation after completion of the project and statements eventual profitability of project and sales projections for the first three-(3) years. Include quantity sold and unit prices in these statements

**(applicants with questions regarding this area of the application should contact the
Small Business Development Center at (573) 882-7096 or
Missouri Enterprise Business Assistance at (573) 364-8570)**

Projected monthly cash flow statement for the first full year attached as described above? ☐ Yes ☐ No

Financial Statements: Furnish balance sheets and income statements for the past three years. If documents are more than 90 days old, provide interim statements (with itemized schedules) for the current fiscal year. Statements must either be certified by an independent accounting firm or be attested to by the company chief executive officer or an authorized financial officer of the company.

If the business is new, furnish individual state and federal tax reporting documents of business owner and principal stockholders for the past three years.

Financial statements and income statements for the past three years attached? ☐ Yes ☐ No

Employment: Provide information on the number of jobs to be created or retained by the proposed project, including the following information for each job:

- (1) type and number of job(s) created or retained
- (2) Salary range for each job created

Additional Information Attached: ☐

VII. OPERATIONAL AND FINANCIAL INFORMATION (continued)

Complete this section if your business is a corporation, limited liability company, s-corporation, or public institution.

If your business is a general partnership, limited partnership, sole proprietorship, not for profit organization or other please fill out Attachment B – Financial Statement.

If your business is a new business, less than 3 years, please fill out Attachment C – Financial Statement.

This section for corporation, limited liability company, s-corporation, or public institution ONLY

Ownership:

State of incorporation: _____ Corporation ID Number: _____

Year established: _____ Year present management assumed control of business: _____

Officers:

	Name & Full Address	Percentage	Other Affiliation
President:	_____ _____ _____	_____	_____
Vice-President	_____ _____ _____	_____	_____
Secretary:	_____ _____ _____	_____	_____
Treasurer:	_____ _____ _____	_____	_____

VII. OPERATIONAL AND FINANCIAL INFORMATION (continued)

Owners/Principal Stockholders:

This section for corporation, limited liability company, s-corporation, or public institution ONLY

Provide a list of owner's (proprietors, partners, directors, and stockholders owning 10% or more of outstanding stock), names, addresses, business affiliations and percentages of ownership. Aggregate any ownership interest of immediate family members.

Name and Full Address	Percentage	Business Affiliations
1. <div></div> <div></div> <div></div>	<div></div>	<div></div>
2. <div></div> <div></div> <div></div>	<div></div>	<div></div>
3. <div></div> <div></div> <div></div>	<div></div>	<div></div>
4. <div></div> <div></div> <div></div>	<div></div>	<div></div>
5. <div></div> <div></div> <div></div>	<div></div>	<div></div>
7. <div></div> <div></div> <div></div>	<div></div>	<div></div>

Additional Information Attached: 0

VII. OPERATIONAL AND FINANCIAL INFORMATION (continued)

Support Services:		
This section for corporation, limited liability company, s-corporation, or public institution <u>ONLY</u>		
Provide a list of support services (legal services, accounting firms, principal banks, etc.), names, addresses, and phone numbers.		
Legal Services	Full Address	Phone Number
<div></div>	<div></div>	<div></div>
	<div></div>	
	<div></div>	
Accounting Firm	Full Address	Phone Number
<div></div>	<div></div>	<div></div>
	<div></div>	
	<div></div>	
Principal Banks	Full Address	Phone Number
<div></div>	<div></div>	<div></div>
	<div></div>	
	<div></div>	
Principal Banks	Full Address	Phone Number
<div></div>	<div></div>	<div></div>
	<div></div>	
	<div></div>	
Principal Banks	Full Address	Phone Number
<div></div>	<div></div>	<div></div>
	<div></div>	
	<div></div>	
Additional Information Attached: <input type="checkbox"/>		

VII. OPERATIONAL AND FINANCIAL INFORMATION (continued)

Total Company Debt

This section for corporation, limited liability company, s-corporation, or public institution ONLY

Provide detailed information on each outstanding debt shown on the most recent balance sheet.

Payable to	Original Amount	Original Date	Present Balance	Rate of Interest	Maturity Date	Monthly Payment	Status	Collateral

Totals

\$ _____

\$ _____

Accounts Receivable and Accounts Payable:

This section for corporation, limited liability company, s-corporation, or public institution ONLY

Period Covered: _____

Aging	Accounts Receivable	Accounts Payable
Under 30 days	_____	_____
30 to 59 days	_____	_____
60 to 90 days	_____	_____
Non-collectible	_____	_____
Totals	_____	_____

NOTE: Accounts receivable and accounts payable totals MUST reconcile with current balance sheets submitted with application.

XIII. APPLICANT DISCLOSURE

Project Name: _____

1. Is the company or its principals involved in any pending or threatened litigation which would have material adverse effect on the company's and/or the principal's financial condition?

No _____
If yes, explain

Yes _____

2. Has the company, its principals or its affiliates ever been involved in bankruptcy, creditor's right or receivership proceedings or sought protection from creditors?

No _____
If yes, explain

Yes _____

3. Has management or any principal stockholder of the company been convicted of any felony?

No _____
If yes, explain

Yes _____

4. Has the company or its principals been under indictment, debarment or investigation by a public agency for a violation of a state or federal statute?

No _____
If yes, explain

Yes _____

5. Company is currently in compliance with all local, state and federal permit and zoning requirements and has not been cited for a violation in the past two years?

No _____
If no, explain

Yes _____

6. Have there been or are there currently any liens or judgements of any nature filed against the company or its principals?

No _____
If yes, explain

Yes _____

IX. MANAGEMENT CERTIFICATION AND CREDIT REPORT AUTHORIZATION

Project Name: _____

**NOTE: THIS FORM MUST BE SIGNED BY AN OFFICIAL AUTHORIZED TO BIND THE
PROVISIONS OF THE APPLICATION**

I attest to the best of my knowledge, all information provided in this proposal and in conjunction with this application is factual and I have not failed to disclose any information relevant to the evaluation of this proposal.

I hereby authorize the Environmental Improvement and Energy Resources Authority to obtain and review a credit report.

Officer or Owner (Signature)

Project Manager (Signature)

Print or Type Name

Print or Type Name

Federal ID Number

Social Security Number for individual applications

Date

Date

*PLEASE USE **BLUE INK FOR SIGNATURES ON ORIGINAL APPLICATION** – ORIGINAL SIGNATURES MUST BE SUBMITTED TO THE MISSOURI MARKET DEVELOPMENT PROGRAM .

XI. EQUIPMENT BIDS

Equipment Bids: Provide bids from three vendors for each piece of equipment to be purchased.
<div>Equipment Bid Information Attached: 0</div>

ATTACHMENT A

Cooperation with the Solid Waste District
Missouri Market Development Program Financial Assistance Application

Project: _____

Solid Waste District: _____

Date: _____

I have discussed the following items with the Solid Waste District in which my project is located.

(EACH ITEM MUST BE DISCUSSED WITH A DISTRICT REPRESENTATIVE)

- 1. Source of recovered material _____
- 2. Markets for end product _____
- 4. Compatibility of this project with the Districts’ Solid Waste Management Plan _____
- 4. Competition for the recovered material in the district _____
- 5. The effect this project will have on the district and its Efforts to reduce solid waste generated _____
- 5. Any permits that may be needed _____

Signature of Applicant

Signature of Solid Waste District Board Member or Planner

ATTACHMENT B – Financial Statement**Market Development Program Financial Assistance Application****(The information requested on this form must be included in the application)**

Date: _____

Name: _____ Social Security Number: _____

Business or Occupation: _____

Address: _____

The undersigned makes the following statement of _____ financial condition as of the close of business of ____ day of _____, 20____, and certified that the information hereinafter set forth is in all respects true, accurate and complete and correctly reflects the financial condition of the undersigned on the date aforementioned.

(FILL IN ALL BLANKS, WRITING "NO" OR "NONE" WHERE NECESSARY TO COMPLETE INFORMATION)

ASSETS		LIABILITIES & NET WORTH	
Cash on Hand and in Banks	\$ _____	Notes Payable to Banks	\$ _____
Accounts Receivable (Collectible)	\$ _____	Notes Payable to Others	\$ _____
Notes Receivable – Secured	\$ _____	Accounts Payable	\$ _____
Notes Receivable – Unsecured	\$ _____	Chattel Mortgages (itemize)	\$ _____
Merchandise	\$ _____		\$ _____
Farm Products	\$ _____		\$ _____
Listed Stocks & Bond (Detail in Schedule)	\$ _____		\$ _____
Other Current Assets (itemize)	\$ _____		\$ _____
_____	\$ _____	Real Estate Mortgages	\$ _____
_____	\$ _____	Taxes Due	\$ _____
_____	\$ _____	Other Liabilities (itemize)	\$ _____
Real Estate (Detail in Schedule)	\$ _____		\$ _____
Machinery & Fixtures (Used in Business)	\$ _____		\$ _____
Live Stock	\$ _____		\$ _____
Cash Value of Life Insurance	\$ _____		\$ _____
Unlisted Stocks & Bonds (Detail in Schedule)	\$ _____		\$ _____
Other Assets (Itemize)	\$ _____	Total Liabilities	\$ _____
_____	\$ _____	Net Worth	\$ _____
_____	\$ _____		\$ _____
Total Assets	\$ _____	Total Liabilities & Net Worth	\$ _____

CONTINGENT LIABILITIES

Liability as Endorser on Notes of Others	\$ _____	All Other contingent Liabilities	\$ _____
Liability as Guaranty/Surety Debts of Others	\$ _____		\$ _____
Liability for Judgements or Suits Pending	\$ _____	Total Contingent Liabilities	\$ _____
Life Insurance carried, \$ _____		GROSS MONTHLY INCOME	
Life Insurance payable to _____		Salary, bonuses & commissions _____	
Insurance on buildings, etc. \$ _____		Dividends & Interest _____	
Insurance on merchandise \$ _____		Real Estate Income _____	
I have accounts with the following named banks(list address/phone)		Other Income (Alimony, Child Support, etc.) _____	
_____		(income need not be revealed if you do not wish to have it considered as a basis for repaying this debt)	
_____		TOTAL INCOME _____	

ATTACHMENT B (continued

SCHEDULES

BE SURE TO INCLUDE EVERY ITEM UNDER EACH SCHEDULE

REAL ESTATE

TITLE TO ALL REAL ESTATE LISTED IS IN MY NAME SOLELY & UNENCUMBERED, EXCEPT AS SHOWN HEREON

[illegible]

STOCKS AND BONDS

ALL SECURITIES LISTED ARE MINE SOLELY, AND ARE IN MY POSSESSION EXCEPT AS SHOWN HEREON

Name of Issuing Corporation And Type of Security	No. of Shares (if stocks) Face Value (if bonds)	Annual Interest or Dividend	Market Value	Registered in Name of

DEBTS TO BANKS (ITEMIZE)

Name of Bank Address/Phone Number	Collateral	Repayment Schedule or Due Date	Amount
			Total Due to Banks _____

DEBTS TO OTHERS (ITEMIZE EVERY ITEM OVER \$100.00)

Name of Creditor	Origin of Debt	Repayment Schedule or Due Date	Amount
			Total Due to others _____

Each undersigned understands that the Market Development Program is relying on the information provided herein (including the designation made as to ownership of property) in consideration of financial assistance. Each undersigned represents and warrants that the information provided is true and complete and that the Market Development Program is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein provided by the applicant.

Signed: _____ Signature: _____

This _____ day of _____, 20_____

ATTACHMENT C

Financial Statement

Market Development Program Financial Assistance Application

(To be completed for new businesses that have no credit history)

Please complete one form for each owner and principal stockholder

Date: _____

Name: _____ Social Security Number: _____

Business and Occupation: _____

Address: _____

BANK INFORMATION (Checking, Savings, Loans)

Please List at Least Five Banks

Name of Bank	Address	Phone Number	Account Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CREDIT CARDS

Please List at Least Five Credit Card Companies

Name of Credit Card	Address	Phone Number	Account Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

VENDORS

List Five Vendors Who Have Extended Credit to the Business other Than Banks and Credit Card

Name of Vendor	Address	Phone Number	Account Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

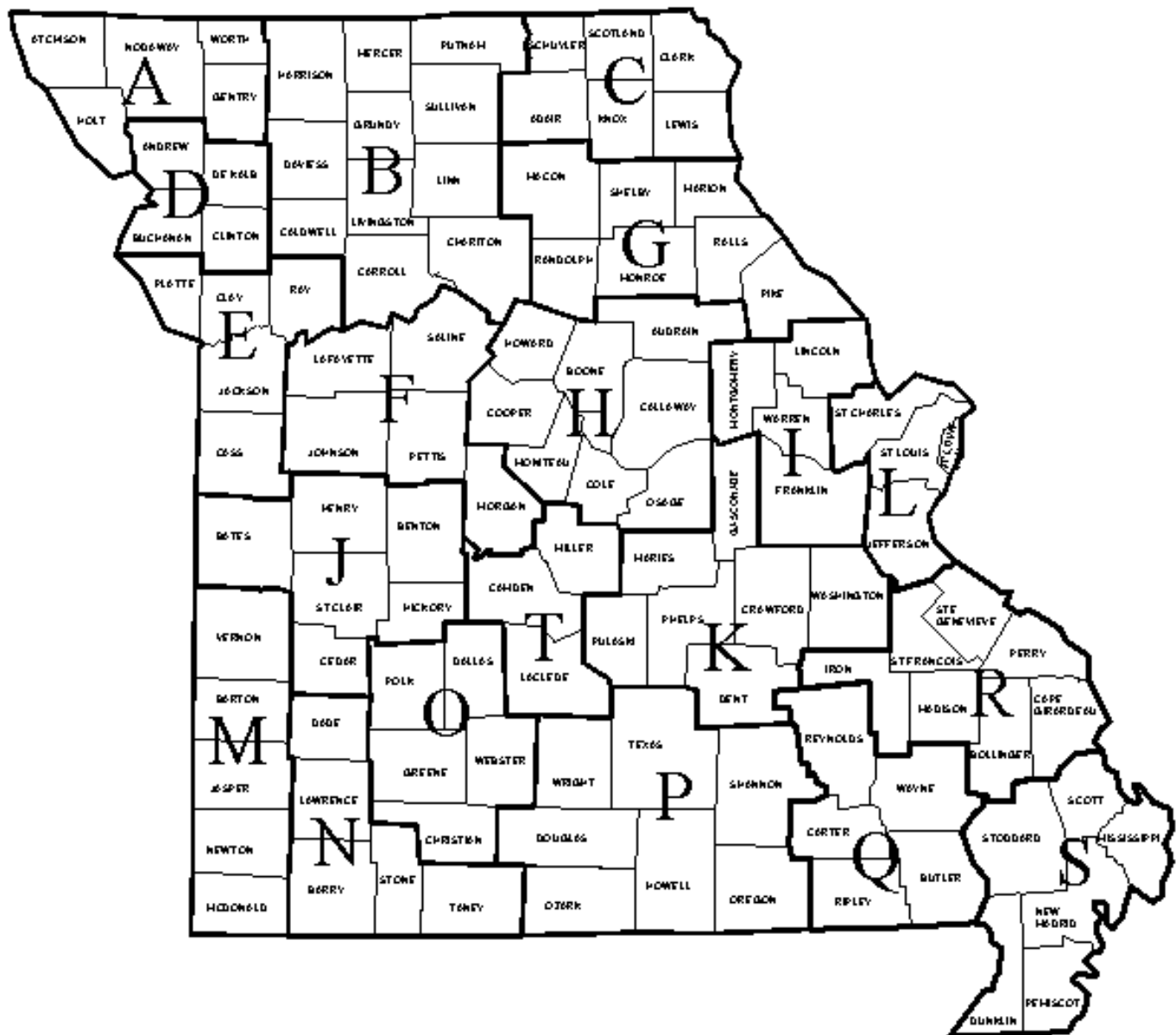
Each undersigned understands that the Market Development Program is relying on the information provided herein in consideration of financial assistance. Each undersigned represents and warrants that the information provided is true and complete and that the Market Development Program is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein provided by the applicant.

Signed: _____

Signature: _____

This _____ day of _____, 20__

Missouri's Solid Waste Management Districts



Solid Waste Management District Planners

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Northwest MO Reg. Cnl. of Govts.
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Rick Gregory

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Harry Rogers

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Terry Gilman

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Bob Hamilton

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Lynda Roehl, District Coordinator

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Greg Batson

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Jim Dickerson

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